

Family Care

UPDATE

Designing Systems for the Future – Respecting the Past

Volume 1, February, 2000

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Dear Colleague,

Welcome to the first edition of the Family Care newsletter!

Over the past four years, many of you have contributed, in big ways and small, to the effort to redesign Wisconsin's long term care system. As Family Care is about to move from the planning and design stage into reality in several pilot counties, we want to bring you up to date on recent and upcoming events.

The past few months have been busy ones for staff of the Department and the Family Care Pilot Counties. Family Care legislation was enacted in October, as part of the 1999-2001 Biennial Budget. Effective February 1, emergency administrative rules have been promulgated to implement the legislation. Several county boards have approved implementation of Family Care Pilots in their counties, and the Family Care benefit is currently available in Fond du Lac County. Family Care will be available soon in Portage, La Crosse, and hopefully, Milwaukee and Richland Counties. Aging and Disability Resource Centers are operational in eight counties. The new State Long Term Care Council will be appointed by Governor Thompson soon; meanwhile, Secretary Leean has appointed members to an interim Long Term Care Advisory Committee.

We plan to publish the Family Care newsletter regularly. It contains more detail about major developments over the past several months. If you have access to the Internet, you can find the newsletter and other updates and information on our Long Term Care web site.

Thanks once again for your help in designing new approaches to managing and delivering long term care services and supports for elderly people and people with disabilities in Wisconsin. We will continue to seek your advice and assistance as we implement the Family Care benefit and new Resource Center services, to ensure that we stay true to the vision we collectively developed.



Chuck Wilhelm, Director
Office of Strategic Finance

Charles Wilhelm

Interim LTC Advisory Committee

Chair:

Tom Frazier, Executive Director of the Coalition of Wisconsin Aging Groups

Vice-Chair:

Lynn Breedlove, Executive Director of the Wisconsin Coalition for Advocacy

Members:

Dale Block, Chair of the State Independent Living Council

Beth Christie, Vice President of Laureate group retirement communities

Carole Eshner, Executive Director of Interfaith Older Adult Programs

Diane Hausinger, Director of the Fond du Lac County Dept. of Administration

Julie Litza, Medicaid Services Supervisor for Prime Care Health Plan

Rita Maher, active Alzheimer's Association Helpline Volunteer

Ella Pious, Chair of the Board of the Southeast Area Agency on Aging

George Potaracke, Executive Director of the Board on Aging and Long Term Care

Tom Rand, Executive Director of the Bethany-St. Joseph's Corporation

David Slautterback, active member of the AARP State Legislative Committee

Melvin Steinke, Chair of the Portage County Commission on Aging

Alice Westermeier, an active foster parent and past Arc president

Charles Wilhelm, Director of the Office of Strategic Finance, DHFS

Interim State Long Term Care Advisory Committee

As the millennium dawned, Secretary Joe Leean appointed the new Interim State Long Term Care Advisory Committee. This 15-member advisory committee will fill the gap before the Governor finalizes his appointments to the new State Long Term Care Council. The Interim Advisory Committee will provide advice and counsel to the Department as we begin the Family Care pilots early this year, and will serve for the next six months or until the Governor's appointments are in place. The kick-off meeting of the Committee was held on January 31, 2000 at the Holiday Inn East in Madison.

Anyone interested in receiving copies of the agendas and minutes of these monthly meetings should contact Bonnie Niemann at (608) 266-3816 by phone or (608) 267-0358 by fax. You may also write to her at: Room 618, 1 W. Wilson St., P.O. Box 7850, Madison, Wisconsin 53707-7850. Meetings will be held on the last Friday of each month in Madison. Anyone is welcome to attend a meeting and hear about long term care issues facing Wisconsin.

*Many thanks to the new Interim
LTC Advisory Committee members for their willingness
to offer their time and lend their considerable
expertise to our endeavors.*

Family Care Legislation Enacted

Legislation establishing the new Family Care benefit and redesigning the overall long term care system was enacted in October, 1999, as part of the State's 1999-2001 Biennial Budget. The legislation reflects a proposal developed during a four-year effort that included many concerned citizens, policy experts and other stakeholders. In the final legislative package, the Legislature included several changes to the Governor's original proposal, including the following:

- During the next several years, the new program will operate only in selected pilot counties. Further expansion in future years is dependent on specific approval by the Governor and the Legislature
- Local Long Term Care Councils are required in counties implementing Family Care. A majority of the members will be older people, people with physical or developmental disabilities or their family members or other representatives.
- The Department may not contract with an entity other than a county, tribe or Family Care district to operate a CMO before January 1, 2002, unless the county and the local LTC Council agree in writing that an additional CMO is necessary and desirable. This period is extended through 2003 unless a county is not meeting performance expectations. In addition, if the county does not have and cannot develop the capacity to serve all entitled persons in the county by 2003, the Department may contract with an organization in addition to the county.
- The Department is directed to seek a federal waiver to implement in up to three pilot sites an alternative model of LTC reform. The specific characteristics of the alternative, similar to those developed by some advocacy and county groups, are specified in the

Continued on page 3

legislation. If the federal waivers are approved, the Department is required, as soon as possible before July 1, 2002, to seek enactment of statutory language and necessary funding to implement the model.

- Changes were included to clarify that people who will pay privately for nursing home or residential long term care services are not required to provide financial information as part of pre-admission screening.

Links to the text of the legislation, along with summaries of its provisions, are available on our Long Term Care web site.

Administrative Rules

The Family Care legislation directs the Department to promulgate rules to implement the new statutes. The Department has promulgated emergency rules, effective on February 1, 2000, so that the first Family Care Pilots can be implemented as planned. The emergency rules expire in 150 days unless extended by the Legislature.

The Department will soon propose permanent rules that will be quite similar to the emergency rules. There will be extensive public and legislative review of the proposed permanent rules before they become effective. Both the emergency rules and the permanent rules will create a new Chapter HFS 10 of the Administrative Code.

The text of the emergency rules is available through our Long Term Care web site. The proposed permanent rules will be published there when they are officially sent to the Legislature's Rules Clearinghouse.

Check our web site for the latest news



As we have done for several years, the Department continues to publish updates on the progress of Family Care through our Long Term Care web site. If you have access to the Internet, you can find this site at the following address:
www.dhfs.state.wi.us/LTCare

residential facilities and hospitals that serve county residents. These facilities received a memo from the Department of Health and Family Services in the last week of January, explaining the new statutory requirements.

A letter from Secretary Leean will be sent out during February giving each facility a specific date to begin making referrals to the Resource Center. Resource Centers will start to contact facilities to formalize a process for referring individuals.

Hospitals, nursing homes, Community-Based Residential Facilities, Residential Care Apartment Complexes and Adult Family Homes will have the responsibility of distributing material from the Resource Center and making timely referrals to Resource Centers.

Timely Advice on Long Term Care Options

Pre-admission consultation will soon be available to people who are making long term care decisions in Family Care Pilot Counties. Aging and Disability Resource Centers in these counties will provide information to individuals about the full range of services available locally and offer a Family Care functional and financial screen. The goal is that people have the information they need to make fully informed decisions about their long term care options.

To make sure that long term care options consultation happens in a timely way, the new Family Care legislation includes requirements for hospitals, nursing homes and long-term care residential facilities to refer elderly people and adults with physical or developmental disabilities to Resource Centers.

The eight county-based Aging and Disability Resource Centers currently operating in Wisconsin have identified all

Family Care Update

Family Care Update is a publication of the Department of Health and Family Services and is issued by staff in the Office of Strategic Finance for counties, advocates, Family Care pilot sites, and other people interested in long term care redesign and Family Care.

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If you would like to be added to our mailing list or have questions or comments, please contact Hollister Chase at: OSF-Center for Delivery Systems Development, 1 S. Pinckney Street, P.O. Box 1379, Madison, WI 53701-1379, or call 608/261-8877, or e-mail chasehl@dhfs.state.wi.us.

Visit our web site at www.dhfs.state.wi.us/LTCare for up-to-date information on Wisconsin's long term care redesign project.

Evaluating Family Care

An independent evaluator, The Lewin Group, Inc., was selected by the Legislative Audit Bureau to evaluate Family Care. The Lewin Group, located in Falls Church, Virginia, is an internationally recognized health care policy research and management consulting firm.

The Family Care evaluation will address cost-effectiveness, access to services and quality of care. The evaluation will provide policymakers with information that can be used to make future decisions about the expanded implementation of the Long Term Care Redesign.

Wisconsin Family Care Pilots 1999 - 2000



Status of Family Care Pilots

Pilot County	Resource Center (RC) CY '00 Status	CMO CY '00 Status
Fond du Lac	In operation.	County Board approved 11-16-99. Began enrollment in February.
Milwaukee	In operation. Received prevention grant.	Goes to County Board in March for April start.
Portage	In operation.	County Board approved 12-21-99. Begin enrollment in April.
La Crosse	In operation.	County Board approved on 1-20-00. Begin enrollment in April.
Richland	Implementation of Resource Center will depend on whether county board agrees to move forward with CMO.	Lead agencies deciding what to recommend to County Board about moving forward with CMO. If yes, will start enrollment in 2000.
Kenosha	In operation.	Second round county.
Marathon	In operation. Received prevention grant.	Second round county.
Waukesha	Implementation of Resource Center will depend on whether county board agrees to move forward with CMO.	Second round county.
Forest, Vilas, Oneida	Implementation of Resource Center will depend on whether county board agrees to move forward with CMO.	Second round county.
Jackson	In operation. Received prevention grant.	Not a CMO pilot (didn't apply).
Trempealeau	In operation. Received prevention grant.	Not a CMO pilot (didn't apply).

The chart on the right summarizes the status of the Family Care Pilots as of February 1, 2000. The five first round counties that will start a Care Management Organization (CMO) in 2000 will also receive special start-up grant/loan to cover their one time administrative and other costs needed to start a CMO. The Department will seek funding for second round counties in the 2001-03 biennial budget.

Complaint System Ready to Go

The process for people to register complaints and grievances in Family Care is in place. Family Care pilots will give applicants and members information about how to contact the Department with complaints.

Regional office staff will attempt to negotiate an informal resolution. If that is not possible, the Department will issue a decision within 20 days. Consumers may also seek a fair hearing from the Division of Hearings and Appeals, which is also ready to accept complaints.

The Department will keep a database of information about complaints and grievances and summary information will be available to CMOs, Resource Centers, advisory and advocacy groups, and evaluators to help in monitoring quality assurance and improvement, review and develop program policy and protocols, and evaluate how well Family Care meets individual and system performance expectations.

Fond du Lac's CMO is the First One Out of the Block

Over 150 people joined Family Care when Fond du Lac County went "live" with its Care Management Organization on February 1, 2000. The new CMO members were Home and Community-Based Waiver participants who volunteered to enroll in the Family Care CMO.

"The first day was pretty quiet," said Maggie McCullough, Project Manager of the CMO. Maggie also had advice for her colleagues who are getting ready to start their CMO operations in April.

"The first day was pretty quiet," said Maggie McCullough, Project Manager of the Fond du Lac County Care Management Organization.

According to Maggie, it is important to have adequate nursing coverage to provide consultation on prior authorization of health care services. Some Medicaid services are included in the Family Care benefit and Fond du Lac is now responsible for authorizing services that were previously authorized by the State.

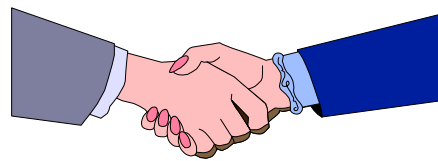
"You can't over-communicate with your providers," Maggie said. Providers that kept themselves informed about Family Care really helped make the conversion to Family Care a smooth transition for the new CMO members. Maggie said that home health and personal care agencies were especially good about participating in the preparations for Family Care.

Wisconsin Needs Federal Involvement to Implement Family Care

Wisconsin needs significant involvement of the federal Health Care Financing Administration (HCFA) in order to implement Family Care. The Department of Health and Family Services has been in regular contact with HCFA, which is located in Baltimore, Maryland, since July of 1998, to educate federal officials about Family Care. Recently, the HCFA Regional Office, located in Chicago, has become more involved in the day to day operations of Family Care, approving the documents that Wisconsin needs to move forward with Family Care.

Some interesting challenges are on the horizon as well. In 2000, Family Care will be implemented under the State's current four Home and Community-Based Waivers (COP-W, and CIP). But Wisconsin needs a special new waiver to consolidate COP-W and CIP under Family Care.

Department staff will continue to work closely with HCFA officials – from both Chicago and Baltimore – to get the waivers we need in place by 2001.





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The Department of Health and Family Services will foster the state-wide development of comprehensive long term care and support systems that maximize independence, recovery and quality of life, while recognizing the need for interdependence and support.

The redesigned system will provide individuals and families with meaningful choices of supports, services, providers, and residential settings, as long as such care or support is necessary, meets an adequate level of quality, is cost-effective, is consistent with the individual's values and preferences, and can be provided within available resources.

Family Care

is a common sense approach to reforming Wisconsin's long-term care system. The goals of this reform are to make our system...

Responsive - give people better choices

Reliable - and fair

Understandable - keep it simple

Accountable

Affordable - now and into the future
